

State of California Secretary of State

STATEMENT OF INFORMATION (Limited Liability Company)

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Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted.)

TSAY CONSTRUCTION AND SERVICES, LLC 200824110286

in the office of the Secretary of State of the State of California

AUG 0 9 2010

	This Space For Filing Use Only
DUE DATE:	
FILE NUMBER AND STATE OR PLACE OF ORGANIZATION	
2. SECRETARY OF STATE FILE NUMBER	3. STATE OR PLACE OF ORGANIZATION
200824110286	NEW MEXICO
NO CHANGE STATEMENT	
If there has been no change in any of the information contained in the last Statement of Information filed with the Secretary of State, check the box and proceed to Item 13.	
If there have been any changes to the information contained in the last Statement of Information filed, or no Statement of Information has been previously filed, this form must be completed in its entirety.	
COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)	
4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE HIGHWAY 68 2 MILES NORTH OF ESPANOLA	CITY AND STATE ZIP CODE SAN JUAN PUEBLO, NM 87566
5. CALIFORNIA OFFICE WHERE RECORDS ARE MAINTAINED (DOMESTIC ONLY	
NAME AND COMPLETE ADDRESS OF THE CHIEF EXECUTIVE O	
8. NAME ADDRESS DONN E. WIESE HIGHWAY 68 2 MILES N. OF	CITY AND STATE ZIP CODE
NAME AND COMPLETE ADDRESS OF ANY MANAGER OR MANAGERS, OR IF NONE HAVE BEEN APPOINTED OR ELECTED, PROVIDE THE NAME AND ADDRESS OF EACH MEMBER (Attach additional pages, if necessary.)	
7. NAME ADDRESS RON LOVATO HIGHWAY 68 2 MILES N. OF	CITY AND STATE ZIP CODE
8. NAME ADDRESS TSAY CORPORATION HIGHWAY 68 2 MILES N. OF	CITY AND STATE ZIP CODE
9. NAME ADDRESS	CITY AND STATE ZIP CODE
AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California address. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 11 must be left blank.)	
10. NAME OF AGENT FOR SERVICE OF PROCESS ROGER F STEWART	
11. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN IND 946 ROOSEVELT ST.	IVIDUAL CITY STATE ZIP CODE RIDGECREST CA 93555
TYPE OF BUSINESS	
12. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY INVESTMENT BUSINESS	
13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.	
NORMA RASCON Was	m Kauron ADMINISTRATOR 7/21/2010
TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM	SIGNATURE TITLE DATE
LLC-12R (REV 03/2007)	APPROVED BY SECRETARY OF STATE